PART B - FEE(S) TRANSMITTAL

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1. Change of corresponde CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-6 Number is required.	2. For printing on the patent from page 1 15t 300.00 OP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.									
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4a. The following fee(s) **SASSUE Fee **ExPublication Fee (N	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0679 (enclose an extra copy of this form).									
a. Applicant claim	tus (from status indicates is SMALL ENTITY state d Publication Fee (if req	is. See 37 CFR 1.27.	☐ b. Applicant is no	o long	ger claiming SMA	LL ENTI	TY status. Sec 37 C	FR 1.27(g)(2).		
interest as shown by the	records of the United Sta	uired) will not be accepte tes Patent and Trademark	Office.		applicalli, a log	u di		assigned of (
Authorized Signature		/			Date		April 16, 2	2007		
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Alexandria, virginia 223	13-1430.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR opersons are required to re-							O to process) reparing, and to complete nmerce, P.O. O. Box 1450,	

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